

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CLAXLO1 0 0 0 B 6 4 B 3 1 1 1 1	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address PARA PLATE 15919 SHOEMAKER, CERRITOS, CA 90702				A. State Manifest Document Number 8 8 2 9 3 7 2 2		
4. Generator's Phone (213) 404-3434				B. State Generator's ID		
5. Transporter 1 Company Name OMEGA RECOVERY SERVICES		6. US EPA ID Number ICAD101412121415101011		C. State Transporter's ID 904880		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (213) 698-0991		
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD WHITTIER, CA 90602		10. US EPA ID Number ICAD101412121415101011		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID CIAD101412121415101011		
				H. Facility's Phone (213) 698-0991		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	
a. WASTE ORM-A N.O.S NA 1693 (FLEXOSOLVENT)		01012 DIM	01019610	G	State EPA/Other	
b.					State EPA/Other	
c.					State EPA/Other	
d.					State EPA/Other	
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
		a. 01		b.		
		c.		d.		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Tony Skratulia		Signature Tony Skratulia		Month Day Year 10/10/89		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Robert J. CIBINGSON		Month Day Year 10/10/89		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name FRANK FORD		Signature Frank Ford		Month Day Year 10/10/89		

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550